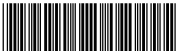


|   |  |   |
|---|--|---|
| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10573238 | <b>Applicant(s)/Patent Under Reexamination</b><br>NAKAMURA, SHIGENOBU |
|   | <b>Examiner</b><br>J. SanMartin            | <b>Art Unit</b><br>2837   |

| ORIGINAL           |                                   |          |  |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |                   |             |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|--|--|--|------------------------------|---|---|---|-------------------|-------------|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |  |  |  | CLAIMED                      |   |   |   |                   | NON-CLAIMED |  |  |  |  |  |  |  |
| 310                |                                   | 364      |  |  |  | H                            | C | I | L | 41 / 047 (2006.0) |             |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
| 310                | 365                               | 328      |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                   |             |  |  |  |  |  |  |  |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1   | 37       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 2   | 38       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 3   | 39       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 4   | 40       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 5   | 41       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 6   | 42       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 7   | 45       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 8   | 48       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 9   | 51       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 10  | 54       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 11  | 57       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 12  | 80       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|   |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

|   |                               |                              |                    |
|---|-------------------------------|------------------------------|--------------------|
| NONE  |                               | <b>Total Claims Allowed:</b> |                    |
|   |                               | 12                           |                    |
| (Assistant Examiner)<br>J. SanMartin/<br>Primary Examiner Art Unit 2837<br>(Primary Examiner) | (Date)<br>3/23/2010<br>(Date) | O. G. Print Claim(s)         | O. G. Print Figure |
|   |                               | 1                            | 4c, 7              |